

ARKANSAS INSURANCE DEPARTMENT RATE FILING ABSTRACT

Form RF-1

Rev. 4/96

Insurer Name: AMEX Assurance Company
 NAIC Number: 27928
 Name of Advisory Organization Whose Filing You are Referencing N/A
 Co. Affiliation to Advisory Organization: Member _____ Subscriber _____ Service Purchaser _____
 Reference Filing #: _____ Proposed Effective Date: 02/26/2006

Contact Person: John Key, Legislative Analyst
 Signature: *John Key*
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(1) LINE OF INSURANCE By Coverage	(2) Indicated % Rate Level Change	(3) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(4) Expected Loss Ratio	(5) Loss Cost Modification Factor	(6) Selected Loss Cost Multiplier	(7) Expense Constant (If Applicable)	(8) Co. Current Loss Cost Multiplier
BI/PD	21.4 %	18.5%					
PIP	20.7 %	15.1%					
UM	7.0 %	6.3 %					
UIM	5.6 %	5.4 %					
UMPD	0.3 %	0.0 %					
COMP	-25.9 %	-41.6 %					
COLL	-6.2 %	-14.7 %					
RENTAL	-3.0 %	-3.4 %					
TOTAL OVERALL EFFECT	5.0 %	-1.4 %					

NA Apply Lost Cost Factors to Future Filings? (Y or N)
51.1 Estimated Maximum Rate Increase for any Arkansas Insured (%)
-39.6 Estimated Maximum Rate Decrease for any Arkansas Insured (%)

Corresponds to Question 3 on RF-2 or RF-WC

Selected Provisions

		Rate Change History		5 Year History	Incurred	Arkansas	Countrywide		
Year	Policy Count	%	Eff. Date	AR Earned Premium (000)	Losses (000)	Loss Ratio	Loss Ratio	A. Total Production Expense	8.2 %
2000	655	8.5 %	09/01/00	461	377	81.8 %	65.2 %	B. General Expense	7.6 %
2001	863	7.0 %	10/01/01	778	756	97.2 %	71.5 %	C. Taxes, License & Fees	3.0 %
2002	872	6.0 %	5/27/02	946	688	72.7 %	72.4 %	D. Underwriting Profit & Contingencies	9.7 % Liab / 8.9% PD
2003	983			1092	1448	132.6 %	75.5 %	E. Other (explain)	
2004	1060			1253	1099	87.7 %	79.0 %	F. TOTAL	28.5 % / 27.7 %